

RICK SNYDER GOVERNOR JAMES K. HAVEMAN

Testimony in Support of HB 5934 to Permit Expedited Partner Therapy (EPT)

House Health Policy Committee

September 27, 2012

Karen Krzanowski, M.A., M.P.H., Manager Sexually Transmitted Disease Section Division of Health, Wellness and Disease Control

Thank you for taking-up this important issue in public health, especially in women's health. The Administration fully supports House Bill 5934, which would authorize the practice of Expedited Partner Therapy (EPT). This is the clinical practice of treating the sex partners of patients diagnosed with chlamydia or gonorrhea by providing prescriptions or medications to the patient to take to his or her partner without the health care provider first examining the partner.

Sexually transmitted infections are a significant public health problem in Michigan and across the United States. Every year gonorrhea and chlamydia are the most frequently reported infections. In 2011, there were 13,070 cases of gonorrhea and 50,063 cases of chlamydia reported in Michigan. In your packet, you will find data that shows how your individual districts are impacted by these infections.

EPT is a proven effective intervention that is highly recommended by the Centers for Disease Control and Prevention (CDC). It is endorsed by the American Congress of Obstetricians and Gynecologists, the American Medical Association, the American Bar Association, the American Academy of Pediatrics, and the Society for Adolescent Health and Medicine. Currently, Michigan is one of only seven states where the practice of EPT is legally prohibited.

Treating partners of individuals with a sexually transmitted infection without a confirmed laboratory result (known as presumptive treatment) has been a standard of care in clinical settings for decades. For infections such as chlamydia and gonorrhea, which are largely asymptomatic and highly infectious, it is imperative that individuals who are infected or who are at increased risk for infection due to exposure are treated quickly to halt the spread to others.

The immediate benefits of EPT are significant. Studies have shown that it reduces the amount of re-infection by approximately 30%. Assuring timely treatment of partners avoids negative health outcomes for the partners as well as subsequent transmission from these untreated cases. Additionally, avoiding re-infection and untreated infection results in fewer negative health outcomes for young women, such as Pelvic Inflammatory Disease, ectopic pregnancy, infertility, and increased risk of HIV.

In this time of shrinking resources, it is also important to acknowledge the fiscal benefits of EPT. As a result of lower re-infection rates and partners being treated outside of a clinical setting, there is reduced burden on public health clinics as well as private physicians, emergency departments, and other health centers, as there are fewer patient visits needed to manage these cases.

In recent years the State STD Program, along with our local health partners, have been forced to make difficult decisions in the face of declining resources. In an ideal situation, every case of reported chlamydia and gonorrhea would be provided individual case management services, including the notification and referral of sexual partners. However, today's public health system does not have the capacity to do this for all of the 60,000 plus reported cases of these infections each year

Lastly, it is important to stress that EPT is safe. We are fortunate that there are effective single-dose oral therapies available to treat these infections. Time has shown that the only side effect is mild nausea and it rarely occurs. California, the first state to adopt EPT, established a dedicated hotline to track adverse reactions. However, the hotline was recently shut-down because in 11 years there were no reports.

EPT provides clinicians with another tool that treat these infections. The department stands ready to assist in the development of administrative rules to implement this new law. Thank you.

Table 13: Gonorrhea, Syphilis, and Chlamydia by Area and Local Health Department Jurisdiction, 2011

Local Health	Gonorrhea		P&S Syphilis*		Chlamydia		Census
Department Jurisdiction	Cases	Rate^	Cases	Rate [^]	Cases	Rate [^]	2010
Allegan	31	27.8	1	0.9	268		111,408
Barry/Eaton	55	32.9		0.6	424		
Bay	28	26.0	Ö	0.0	339	314.6	166,932
Benzie/Leelanau	1	2.5	Ō	0.0	83	211.6	107,77
Berrien	224	142.8	Ö	0.0	1,067	680.4	39,233
Br/Hills/St Joseph	25	16.3	0	0.0	299	195.1	156,813
Calhoun	125	91.8	2	1.5	924	678.7	153,231
Chippewa	-	0.0	0	0.0	88	228.5	136,146
Central MI Dist	54	28.3	4	2.1	474	248.4	38,520
Delta/Menominee	4	6.5	3	4.9	101	165.3	190,805
Dickinson/Iron	2	5.3	Ö	0.0	70	184.3	61,098
District #2	3	4.5	0	0.0	70	104.3	37,985
District #4	11	13.9	1	1.3	92		67,168
District #10	30	11.5	2	0.8	541	116.6	78,891
Genesee	875	205.5	5	1.2	The state of the s	206.8	261,616
Grand Traverse	5	5.7	1	1.2	3,192	749.7	425,790
Huron	3	0.0	0	0.0	255	293.2	86,986
Ingham	342	121.8	7		47	141.9	33,118
Ionia	7	11.0	Ó	2.5	1,915	681.7	280,895
Jackson -	84	52.4	2	0.0	128	200.3	63,905
Kalamazoo	351			1.2	696	434.3	160,248
Kent		140.2	15	6.0	1,759	702.7	250,331
	734	121.8	9	1.5	3,615	599.9	602,622
Lapeer	13	14.7	1	1.1	122	138.1	88,319
Lenawee	34	34.0	2	2.0	209	209.2	99,892
Livingston	12	6.6	1	0.6	251	138.7	180,967
LMAS District	5	18.3	0	0.0	38	139.0	27,345
Macomb	501	59.6	25	3.0	1,960	233.1	840,978
Marquette	10	14.9	0	0.0	142	211.7	67,077
Midland	14	16.7	1	1.2	191	228.4	83,629
Monroe	64	42.1	1	0.7	352	231.5	152,021
Muskegon	217	126.0	4	2.3	1,219	707.9	172,188
Mid-MI District	42	23.2	2	1.1	349	192.6	181,200
NW Michigan	21	19.7	0	0.0	216	203.0	106,387
Dakland	989	82.3	30	2.5	3,691	307.0	1,202,362
Ottawa	66	25.0	3	1.1	571	216.5	263,801
Saginaw	202	100.9	1	0.5	1,558	778.3	200,169
Sanilac	3	7.0	0	0.0	50	116.0	43,114
Shiawassee	18	25.5	1	1.4	163	230.7	70,648
St Clair	56	34.3	2	1.2	425	260.7	163,040
Tuscola	8	14.4	0	0.0	104	186.6	55,729
/an Buren/Cass	49	38.1	0	0.0	323	251.3	128,551
Vashtenaw	237	68.7	11	3.2	1,392	403.7	344,791
Vayne excl Detroit	989	89.4	34	3.1	3,774	341.0	1,106,807
City of Detroit	6,521	913.6	102	14.3	16,414	2299.6	713,777
VestUpDist	3	4.2	0	0.0	91	128.4	70,851
Detroit Metro Area#	9,132	214.0	194	4.5	26,738	626.6	
Out-State	3,937	70.1	79	1.4	26,738	476.1	4,267,304 5,616,336
					1	The state of the s	3,5.0,000

^{*}Detroit Metro Area includes Lapeer, Monroe, Macomb, Oakland, St. Clair, and Wayne Counties

^{*} P&S: Primary and Secondary Syphilis